	PAIENI	Effec	tive Octo			ION RECU	JKI	,	10/3	11.	577		
	·	CLAIMS A	S FILED			umn 2) .		SMALL TYPE		OR	OTHER	R THAN ENTITY	1.
7	OTAL CLAIMS	2.4].	RATE	FEE	٦	RATE	FEE	┪.
F	DR .		NUMBER FILED		NUMBER EXTRA		1	BASIC FI	EE 385.00	OR	BASIC FEE	770.00	1 .
T	TAL CHARGE	ABLE CLAIMS	24 minus 20=		• 4			XS 9=		OR	YSAS		1
INI	DEPENDENT C	LAIMS	4 minus 3 =		-			X43=	+	-	Vac	72	1
M	ILTIPLE DEPE	NDENT CLAIM P			A43=	+	-IOR	A00=	86	1			
• 11	the difference	in column 1 is	loce than a	om cotor	-0- in	neluma 2	i	+145=		OR	+290=	·	1
- 11	•	e in column 1 is	TOTAL	·	OR	TOTAL	928	4.					
CLAIMS AS AMENDED - PART II OTHER 1 (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL E													
AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER		HIGH NUME PREVIO	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	۱.
	Total	- 34	Minus	PAID	/			X\$ 9=	FEE	OR	X\$18=	FEE	
Z E	Independent	. 4	Minus	***	<u> </u>	2		X43=	1.	1	X86≈		
V	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							:	+	OR			}
	1,30), 32,33		20	- 29	Cancelle	e.j [+145=		OR	+290=		
	[8] O	Column 1)	(Column 2) (Column 3)			4	TOTAL LODIT, FEE		OR	TOTAL ADDIT. FEE		e de	
Ξ.		CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUME PREVIO PAID F	EST IER USLY	PRESENT EXTRA	V	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 25	Minus	-234		= / .		X\$ 9=		OR	50 (D) X\$18=	20·0	٠.
	Independent	• 5	Minus	***		= /		X43=		OR	X86- U	WO - 10	ļ
	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
							L	+145=	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	OR	+290=	2674	
			•			•	A	DOIT, FEE		OR ,	DOT FEE	350.40	y-0
7		(Column 1)		(Colum		(Column 3)	_	٠.			-	٠	
		REMAINING . AFTER AMENDMENT		NUMB PREVIOU PAID F	ER . USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ِ چ	Total	•	Minus	**			Γ	X\$ 9=		OR	X\$18=		
	Independent	• .	Minus	***		•	H	X43=			X86=		
7	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		-	,,,,,,,,,		OR	~~		Ī
. 14		no d in tour man h			A. L. '		L	+145=	•	OR	+290=		
	the "Highest Nur the "Highest Nur	nn 1 is less than thi nber Previously Pai nber Previously Paid ber Previously Paid	d for in THIS id for in THIS	SPACE IS	less than less than	20, enter *20.* 3, enter *3.*	.~	TOTAL DOIT FEE d in the app	propriate box		TOTAL DDIT. FEE ITMI 1.		

Application or Docket Number